http://westbrs:9000/bin/cgi-bin/srchhist.pl?state = c74o1g.27.1&f = ffsearch&userid = jweber

WEST Search History

DATE: Friday, May 28, 2004

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		DB=EF	PAB,JPAB,DWPI; PLUR=YES; OP=ADJ	
		L8	L5 and phosphatase	6
		L7	L6 and phosphatase	0
		L6	19990303	127
		L5	(drug resistance) and (reduc\$5 decreas\$5 diminish\$4)	299
		DB=PC	GPB,USPT; PLUR=YES; OP=ADJ	
		L4	L3 same (phosphatase with inhib\$5)	7
		L3	(drug resistance) with (reduc\$5 decreas\$5 diminish\$4)	717
		DB=PC	GPB; PLUR=YES; OP=ADJ	
		L2	L1 and drug resistance	1
		L1	20020173031.did.	1

END OF SEARCH HISTORY

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* * * * * * * * * * * * * STN Columbus * * * * *
LE 'HOME' ENTERED AT 09:27:11 ON 28 MAY 2004
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TER SCREEN EXPRESSION OR (END):end
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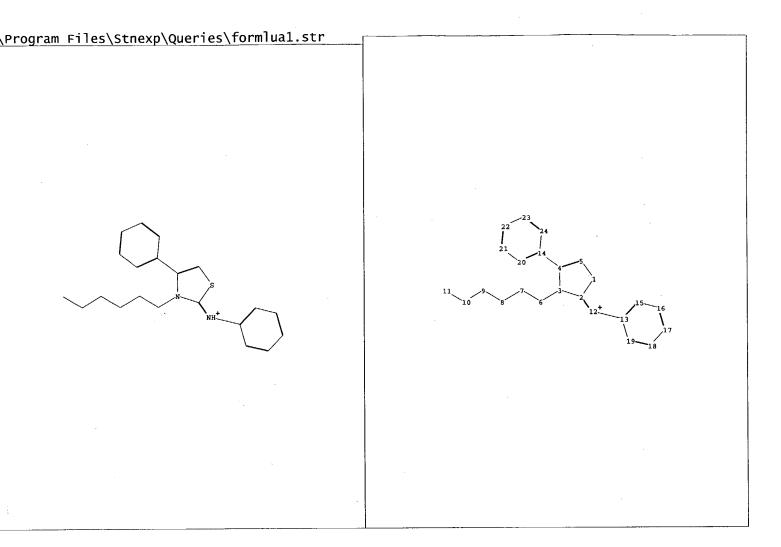
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157.10

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ng nodes:

1 2 3 4 5 13 14 15 16 17 18 19 20 21 22 23 24

ain bonds:

2-12 3-6 4-14 6-7 7-8 8-9 9-10 10-11 12-13

ng bonds:

1-2 1-5 2-3 3-4 4-5 13-15 13-19 14-20 14-24 15-16 16-17 17-18 18-19 20-21

21-22 22-23 23-24

act/norm bonds:

2-3 2-12 3-4 3-6 12-13

act bonds:

1-2 1-5 4-5 4-14 6-7 7-8 8-9 9-10 10-11

rmalized bonds:

13-15 13-19 14-20 14-24 15-16 16-17 17-18 18-19 20-21 21-22 22-23 23-24

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6 7 8 9 10 11 12

tch level:
1:Atom 2:Atom 3:Atom 4:Atom 5:Atom 6:CLASS 7:CLASS 8:CLASS 9:CLASS 10:CLASS
11:CLASS 12:CLASS 13:Atom 14:Atom 15:Atom 16:Atom 17:Atom 18:Atom 19:Atom 20:Atom
21:Atom 22:Atom 23:Atom 24:Atom

FILE 'HOME' ENTERED AT 14:11:02 ON 28 MAY 2004 => index bioscience FILE 'DRUGMONOG' ACCESS NOT AUTHORIZED COST IN U.S. DOLLARS SINCE FILE TOTAL ENTRY SESSION 0.21 0.21 FULL ESTIMATED COST INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, AQUASCI, BIOBUSINESS, BIOCOMMERCE, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CANCERLIT, CAPLUS, CEABA-VTB, CEN, CIN, CONFSCI, CROPB, CROPU, DISSABS, DDFB, DDFU, DGENE, DRUGB, DRUGMONOG2, ...' ENTERED AT 14:11:17 ON 28 MAY 2004 70 FILES IN THE FILE LIST IN STNINDEX Enter SET DETAIL ON to see search term postings or to view search error messages that display as 0* with SET DETAIL OFF. => s ((drug resistance)(L)(reduc##### or decreas##### or diminish####)) and (phosphatase(L)inhib?) 8 FILE ADISCTI 7 FILE BIOSIS FILE BIOTECHABS FILE BIOTECHDS FILE BIOTECHNO 3 12 FILES SEARCHED... 4 FILE CANCERLIT 11 FILE CAPLUS FILE DISSABS FILE DDFU 1 24 FILES SEARCHED... 7 FILE DRUGU 29 FILES SEARCHED... FILE EMBASE 7 FILE ESBIOBASE 6 1 FILE FEDRIP 38 FILES SEARCHED... FILE GENBANK 24 6 FILE IFIPAT FILE LIFESCI 3 FILE MEDLINE 6 FILE NTIS 1 FILE PASCAL 4 52 FILES SEARCHED... 3 FILE PROMT 7 FILE SCISEARCH FILE TOXCENTER 11 3355 FILE USPATFULL 155 FILE USPAT2 66 FILES SEARCHED... 7 FILE WPIDS 7 FILE WPINDEX 26 FILES HAVE ONE OR MORE ANSWERS, 70 FILES SEARCHED IN STNINDEX QUE ((DRUG RESISTANCE)(L)(REDUC##### OR DECREAS##### OR DIMINISH####)) AND (PHOSPHATASE(L) INHIB?)

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- 8 FILE ADISCTI
- 0* FILE ADISINSIGHT
- 6 FILES SEARCHED...
 - 2 FILE BIOSIS

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10 FILES SEARCHED...
   1 FILE BIOTECHNO
 13 FILES SEARCHED...
        3 FILE CANCERLIT
           FILE CAPLUS
         6
 18 FILES SEARCHED...
        0* FILE CONFSCI
         2 FILE DISSABS
 25 FILES SEARCHED...
        3 FILE DRUGU
           FILE EMBASE
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 32 FILES SEARCHED...
         2 FILE ESBIOBASE
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         0* FILE FOREGE
         2 FILE GENBANK
 43 FILES SEARCHED...
        1 FILE LIFESCI
         0* FILE MEDICONF
         2 FILE MEDLINE
 48 FILES SEARCHED...
       1 FILE PASCAL
 52 FILES SEARCHED...
         0* FILE PHAR
         2 FILE PROMT
         0* FILE PROUSDDR
         3 FILE SCISEARCH
 61 FILES SEARCHED...
        6 FILE TOXCENTER
       669 FILE USPATFULL
         2 FILE USPAT2
 68 FILES SEARCHED...
 18 FILES HAVE ONE OR MORE ANSWERS, 70 FILES SEARCHED IN STNINDEX
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F2
         8 ADISCTI
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F3
          6 TOXCENTER
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F5
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          3 EMBASE
          3 SCISEARCH
F8
          2 BIOSIS
F9
F10
          2 DISSABS
F11
          2 ESBIOBASE
F12
          2 GENBANK
F13
          2 MEDLINE
F14
          2 PROMT
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F16
          1 BIOTECHNO
F17
          1 LIFESCI
F18
          1 PASCAL
=> file f2-11 f13-14 f16-18
COST IN U.S. DOLLARS
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11.40

11.61

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FULL ESTIMATED COST

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- 3 FILES SEARCHED...
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- 11 FILES SEARCHED...
- 13 FILES SEARCHED...

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PROCESSING COMPLETED FOR L3

23 DUP REM L3 (22 DUPLICATES REMOVED) ANSWERS '1-8' FROM FILE ADISCTI ANSWERS '9-14' FROM FILE CAPLUS ANSWERS '15-16' FROM FILE CANCERLIT ANSWERS '17-19' FROM FILE DRUGU ANSWERS '20-21' FROM FILE DISSABS ANSWERS '22-23' FROM FILE PROMT

=> d bib abs 1-23

- L4 ANSWER 1 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
- AN 1997:42596 ADISCTI
- DN 800540601
- ${\tt TI}$ New insights into the pathogenesis and management of steroid-resistant asthma.
- AU Spahn J D; Leung D Y M; Szefler S J.
- SO Journal of Asthma (Jan 1, 1997), Vol. 34, No. 3, pp. 177-194
- DT Citation
- RE Obstructive Airways Disease
- FS Citation
- LA English
- L4 ANSWER 2 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
- AN 1996:10694 ADISCTI
- DN 800473930
- TI Increase of bone mineral density and anabolic variables in patients with rheumatoid arthritis resistant to methotrexate after cyclosporin A therapy.
 - ADIS TITLE: Cyclosporin + methotrexate: therapeutic use.
 - Rheumatoid arthritis.
- AU Ferraccioli G; Casatta L; Bartoli E.
- CS University of Udine, Udine, Italy.
- SO Journal of Rheumatology (Sep 1, 1996), Vol. 23, pp. 1539-1542
- DT Study
- RE Rheumatic Disease
- FS Summary
- LA English
- WC 469
- L4 ANSWER 3 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
- AN 1996:6556 ADISCTI
- DN 800447599
- TI How best to use tacrolimus (FK506) for treatment of steroid- and OKT3-resistant rejection after renal transplantation.
- AU Eberhard O K; Kliem V; Oldhafer K; et al.
- SO Transplantation (May 15, 1996), Vol. 61, pp. 1345-1349
- DT Citation
- RE Transplant Rejection
- FS Citation
- LA English
- L4 ANSWER 4 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
- AN 1996:18948 ADISCTI
- DN 800487874
- TI Steroid-resistant asthma: evaluation and management.
- AU Nimmagadda S R; Spahn J D; Leung D Y M; et al.
- SO Annals of Allergy, Asthma & Immunology (Nov 1, 1996), Vol. 77, pp. 345-355
- DT Citation
- RE Obstructive Airways Disease
- FS Citation
- LA English
- L4 ANSWER 5 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
- AN 1996:12779 ADISCTI
- DN 800434372
- TI Relevance of multidrug resistance to rheumatoid arthritis: development of a new therapeutic hypothesis.
- AU Salmon S E; Dalton W S.
- SO Journal of Rheumatology (Mar 1, 1996), Vol. 23 (Suppl. 44), pp. 97-101
- DT Citation
- RE Rheumatic Disease
- FS Citation
- LA English

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L4
     ANSWER 6 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
     1996:21006 ADISCTI
ΑN
     800464385
DN
     Current management of asthma patients with corticosteroid resistance.
ΤI
     Busse W W; McGill K; Jarjour N N.
AU
SO
     American Journal of Respiratory and Critical Care Medicine (Aug 1, 1996),
     Vol. 154, pp. 70-73
DT
     Citation
RE
     Obstructive Airways Disease
FS
     Citation
     English
LΆ
     ANSWER 7 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
T.4
     1995:57985 ADISCTI
AN
DN
     800406418
     P-glycoprotein - a marker of cancer-cell behavior.
ΤI
ΑU
     Pinedo H M; Giaccone G.
     New England Journal of Medicine (Nov 23, 1995), Vol. 333, pp. 1417-1419
SO
DT
     Citation
RE
     Cancer Chemotherapy
FS
     Citation
LA
     English
     ANSWER 8 OF 23 ADISCTI COPYRIGHT (C) 2004 Adis Data Information BV on STN
T.4
AN
     1995:20665 ADISCTI
DN
     800379422
     Management of steroid-resistant asthma.
TТ
ΑU
     Landwehr L P; Spahn J D; Szefler S J; et al.
     Clinical Immunotherapeutics (Aug 1, 1995), Vol. 4, pp. 124-137
SO
DT
     Citation
RE
     Obstructive Airways Disease
FS
     Citation
LA
     English
L4
     ANSWER 9 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN DUPLICATE 1
AN
     1999:662447 CAPLUS
DN
     131:317445
     Contribution of mdr1b-type P-glycoprotein to okadaic acid resistance in
TΤ
     rat pituitary GH3 cells
     Ritz, Vera; Marwitz, John; Sieder, Sabine; Ziemann, Christina;
ΑU
     Hirsch-Ernst, Karen I.; Quentin, Iris; Steinfelder, Hans Jurgen
     Institute of Pharmacology and Toxicology, University of Gottingen,
CS
     Gottingen, D-37075, Germany
SO
     Naunyn-Schmiedeberg's Archives of Pharmacology (1999), 360(2),
     116-121
     CODEN: NSAPCC; ISSN: 0028-1298
PB
     Springer-Verlag
DT
     Journal
     English
LΑ
AB
     Okadaic acid as well as other, structurally different, inhibitors
     of serine/threonine phosphatases 1 and 2A induce apoptosis in
     pituitary GH3 cells. Incubation with stepwise raised concns. of okadaic
     acid resulted in the isolation of cells that were increasingly less
     sensitive to the cytotoxic effect of this agent. After about 18 mo cells
     were selected that survived at 300 nM okadaic acid, which is about 30
     times the initially lethal concentration This study revealed that a major pharmacokinetic mechanism underlying cell survival was the development of
     a P-glycoprotein-mediated multidrug resistance (MDR) phenotype.
     increase in mRNA levels of the mdr1b P-glycoprotein isoform correlated
     with the extent of drug resistance. Functional assays
     revealed that increasing drug resistance was
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paralleled by a decreased accumulation of rhodamine 123, a

fluorescent dye which is a substrate of mdr1-mediated efflux activity. Resistance could be abolished by structurally different chemosensitizers

of P-glycoprotein function like verapamil and reserpine but not by the leukotriene receptor antagonist MK571 which is a modulator of the multidrug resistance-associated protein (MRP). Okadaic acid resistance included cross-resistance to other cytotoxic agents that are substrates of mdr1-type P-glycoproteins, like doxorubicin and actinomycin D, but not to non-substrates of mdr1, e.g. cytosine arabinoside. Thus, functional as well as biochem. features support the conclusion that okadaic acid is a substrate of the mdr1-mediated efflux activity in rat pituitary GH3 cells. Maintenance of resistance after withdrawal of okadaic acid as well as metaphase spreads of 100 nM okadaic acid-resistant cells suggested a stable MDR genotype without indications for the occurrence of extrachromosomal amplifications, e.g. double minute chromosomes.

RE.CNT 28 THERE ARE 28 CITED REFERENCES AVAILABLE FOR THIS RECORD ALL CITATIONS AVAILABLE IN THE RE FORMAT

- L4 ANSWER 10 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN DUPLICATE 2
- AN 1999:452389 CAPLUS
- DN 131:237604
- TI Doxorubicin-resistant LoVo adenocarcinoma cells display resistance to apoptosis induction by some but not all **inhibitors** of ser/thr **phosphatases** 1 and 2A
- AU Sieder, S.; Richter, E.; Becker, K.; Heins, R.; Steinfelder, H. J.
- CS Institute of Pharmacology and Toxicology, University of Gottingen, Gottingen, D-37075, Germany
- SO Toxicology (1999), 134(2,3), 109-115 CODEN: TXCYAC; ISSN: 0300-483X
- PB Elsevier Science Ireland Ltd.
- DT Journal
- LA English
- LoVo adenocarcinoma cells are fairly sensitive to cytostatic drugs, e.q. AB doxorubicin, but can develop drug resistance by expression of a P-glycoprotein-mediated MDR1 phenotype. LoVo cells respond with apoptosis to nanomolar concns. of okadaic acid and micromolar concns. of cantharidic acid. Interestingly, LoVoDx cells which had become about 10-fold less sensitive to doxorubicin by incubation in increasing concns. of this cytostatic drug were also less sensitive to the toxicity of okadaic acid. Resistance to both agents was lost or significantly reduced by incubation in drug-free medium for about 4 mo. On the other hand, LoVoDx cells did not lose responsiveness to the structurally different phosphatase inhibitor cantharidic acid but were about twofold more sensitive to the cytotoxic effect of this agent. Thus, MDR expression protects LoVo cells from the toxicity of phosphatase inhibitors that presumably are substrates of the P-glycoprotein, e.g. okadaic acid and its derivs. but not cantharidic acid, despite the fact that both agents are potent inducers of apoptotic cell death via ser/thr phosphatase inhibition.
- RE.CNT 21 THERE ARE 21 CITED REFERENCES AVAILABLE FOR THIS RECORD ALL CITATIONS AVAILABLE IN THE RE FORMAT
- L4 ANSWER 11 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN DUPLICATE 3
- AN 1992:462438 CAPLUS
- DN 117:62438
- TI The effect of sodium butyrate, interferon- α and verapamil on the sensitivity of ovarian carcinoma cells to adriamycin
- AU Manor, Y.; Shneyour, Y.; Nordenberg, J.; Levavi, H.; Ovadia, J.; Novogrodsky, A.; Wasserman, L.
- Novogrodsky, A.; Wasserman, L. CS Obstet. Gynecol. Dep., Basil Gerald Felsenstein Med. Res. Cent., Petah Tikva, 49100, Israel
- SO Cancer Journal (1992), 5(2), 101-6 CODEN: CANJEI; ISSN: 0765-7846
- DT Journal
- LA English
- AB Acquired **drug resistance** and drug toxicity are the main limitations to successful chemotherapy. The addition of modifiers is intended to increase drug sensitivity and to **decrease** systemic

Modulation of the sensitivity of ovarian tumor cells to adriamycin by sodium butyrate, interferon- α and verapamil was investigated. First passage cultures of cells derived from the ascitic fluid of a clin. refractory ovarian carcinoma patient (BH) and an established ovarian tumor cell line (CAOV-3) were used. Chromosomal G-banding, lipid content and alkaline phosphatase activity were investigated. CA 125 and P-glycoprotein were shown by immunoperoxidase staining. P-glycoprotein function was demonstrated using rhodamine. Drug sensitivity was determined by the MTT method. Double minute chromosomes and a homogeneously staining region were found in Bh cells. CAOV-3 and BH were CA 125-pos. Most of BH and several CAOV-3 cells were P-glycoprotein-pos. The P-glycoprotein-transport system was active in BH and less so in CAOV-3 cells. Sodium butyrate increased lipid accumulation whereas interferon-\alpha decreased alkaline phosphatase activity in CAOV-3 (50%). CAOV-3 were initially more sensitive to adriamycin than BH. Sodium butyrate potentiated the antiproliferative effect of low concns. of adriamycin in Bh while in CAOV-3 the effect was less pronounced. BH and CAOV-3 cells showed different sensitivity profiles to interferon- α . Addition of interferon to adriamycin resulted in an additive growth inhibiting effect in BH cells only. Verapamil, known to reverse multidrug resistance, potentiated the antiproliferative activity of adriamycin in BH, whereas in CAOV-3 its effect seemed additive.

- L4 ANSWER 12 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN
- AN 1997:307409 CAPLUS
- DN 126:338490
- TI Concomitant decrease of resistance and modifications of the cytoskeleton after all-trans retinoic acid and phorbol ester treatments in a navelbine-resistant bladder carcinoma cell line
- AU Debal, Vincent; Breillout, Fabienne; Manfait, Michel
- CS Laboratoire de Spectroscopie Biomoleculaire, GIBSA, IFR 53, U.F.R. de Pharmacie, Reims, 51096, Fr.
- SO Anticancer Research (1997), 17(2A), 1147-1154 CODEN: ANTRD4; ISSN: 0250-7005
- PB Anticancer Research
- DT Journal
- LA English
- AB The bladder carcinoma cell line J82-NVB was selected for resistance to the new vinca alkaloid navelbine. These cells possessed a non-MDR phenotype and were cross-resistant to vinca alkaloids and taxoids. Some morphol. differences between sensitive (J82) and resistant (J82-NVB) cells were observed J82 cells had a heterogeneous population morphol. with both epithelial and spindle shaped cells, while J82-NVB cells were almost all of the epithelial type. Vimentin intermediate filaments were less organized in J82-NVB than in J82 cells. Moreover, desmosomes were present in the membranes of J82-NVB cells but not in J82 cells. These findings suggest that J82 cells are poorly differentiated epithelial cells while J82-NVB cells possess some characteristics of a more differentiated epithelial cell line. After a two-week treatment with all-trans retinoic acid, all the cells became spindle shaped, vimentin filaments reappeared in the cytoplasm of J82-NVB cells and desmosomes disappeared from the membranes of these cells. These changes were accompanied by a decrease from 17 to 4.6 of the resistance factor of J82-NVB cells to navelbine. This decrease in resistance was concomitant with modifications of microtubules assembly regulation mechanisms. After navelbine treatment, microtubule reassembly occurred in resistant but not in sensitive nor in retinoic acid treated cells. Okadaic acid, a protein phosphatase inhibitor, inhibited microtubule reassembly in resistant cells, and 2-aminopurine, a protein kinase inhibitor, induced microtubule reassembly in sensitive cells after navelbine treatment. These findings show that microtubule reassembly after depolymn. is regulated by the kinase/phosphatase systems. A treatment with phorbol myristate acetate (PMA), a protein kinase C (PKC) agonist, induced the same morphol. modifications and resistance decrease as retinoic acid

treatment. A specific PKC inhibitor (Bisindolylmaleimide) prevented these PMA-induced morphol. modifications and resistance decrease in J82-NVB cells, showing that these effects were mediated by PKC. study suggests that, in part by acting on some properties of the cytoskeleton, the differentiation modulator, retinoic acid, and the signal transduction modulator, phorbol myristate acetate, can decrease the resistance of J82-NVB cells to microtubule poisons.

THERE ARE 23 CITED REFERENCES AVAILABLE FOR THIS RECORD ALL CITATIONS AVAILABLE IN THE RE FORMAT

- L4ANSWER 13 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN
- AN 1993:469305 CAPLUS
- DN 119:69305
- TT Defective translocation of protein kinase C in multidrug-resistant HL-60 cells confers a reversible loss of phorbol ester-induced monocytic differentiation
- Slapak, Christopher A.; Kharbanda, Surender; Saleem, Ahamed; Kufe, Donald ΑU
- CS Dana-Farber Cancer Inst., Harvard Med. Sch., Boston, MA, 02115, USA
- SO Journal of Biological Chemistry (1993), 268(17), 12267-73 CODEN: JBCHA3; ISSN: 0021-9258
- DTJournal
- LA English
- AB Previous studies have demonstrated that human HL-60 myeloid leukemia cells differentiate in response to phorbol esters. This event is associated with induction of the c-jun early response gene and appearance of a monocytic phenotype. The present studies have examined the effects of vincristine-selected, multi-drug resistance on 12-O-tetradecanoylphorbol-13-acetate (TPA)-induced HL-60 cell differentiation. The results demonstrate that multi-drug-resistant HL-60 cells, designated HL-60/zinc, fail to respond to TPA with an increase in c-jun transcripts or other phenotypic characteristics of monocytic differentiation. By contrast, treatment of HL-60/zinc cells with okadaic acid, an inhibitor of serine/threonine protein phosphatases, increase c-jun transcription, growth arrest, and expression of the c-fms gene. Studies were also performed with an HL-60/zinc revertant (HL-60/zinc/R) line that has regained partial sensitivity to vincristine. The finding that HL-60/zinc/R cells respond to TPA with induction of a monocytic phenotype, but not c-jun expression, suggests that c-jun induction is not obligatory for monocytic differentiation. Other studies further demonstrate that the jun-B and fra-1 genes are induced by TPA in both HL-60/zinc and HL-60/zinc/R cells, whereas c-fos expression is attenuated in the HL-60/zinc line. Since TPA activates protein kinase C (PKC), the authors examined translocation of PKC from the cytosol to the membrane fraction. Although HL-60 and HL-60/zinc/R cells demonstrated translocation of PKC activity, this subcellular redistribution was undetectable in HL-60/zinc cells. Activity of the mitogen-activated protein kinase family with associated phosphorylation of c-Jun Y-peptide was markedly diminished in TPA-treated HL-60/zinc cells, but not in response to okadaic acid. together, these findings suggest that vincristine resistance confers insensitivity to TPA-induced differentiation and can include defects in PKC-mediated signaling events and induction of jun/fos early response gene expression.
- 1.4 ANSWER 14 OF 23 CAPLUS COPYRIGHT 2004 ACS on STN
- 1985:89764 CAPLUS AN
- DN 102:89764
- Resistance of CCRF-CEM cloned sublines to 5-fluorodeoxyuridine associated ΤI with enhanced phosphatase activities
- ΑU Fernandes, Daniel J.; Cranford, Stephen K.
- CS Bowman Gray Sch. Med., Wake Forest Univ., Winston-Salem, NC, 27103, USA
- SO Biochemical Pharmacology (1985), 34(1), 125-32 CODEN: BCPCA6; ISSN: 0006-2952
- DTJournal

Ι

AΒ Resistance of human CCRF-CEM leukemic cells in tissue culture to 5-fluoro-2'-deoxyuridine (FdUrd)(I) [50-91-9] was examined following a single drug exposure (FS sublines). In two FS sublines generated by soft agar cloning of FdUrd sensitive cells in the presence of 1 nM FdUrd, the level of drug resistance was maintained at 22- to 30-fold following 1 mo growth in the absence of FdUrd. Characteristic of the FS sublines was a decreased accumulation and retention of free intracellular 5-fluoro-2'-deoxyuridine-5'-monophosphate (FdUMP) [134-46-3] averaging 3% of FdUrd sensitive cells, a more rapid rate of disappearance of free FdUMP and FdUMP-bound thymidylate synthase (EC 2.1.1.45) (5,10-methylenetetrahydrofolate:dUMP C-methyltransferase) [9031-61-2], and enhanced alkaline [9001-78-9] and acid phosphatase [9001-77-8] activities. There was no significant difference in the number of nucleoside transport sites per cell among the FS sublines and FdUrd-sensitive cells, indicating that the decreased accumulation of FdUMP in the resistant sublines was not the result of impaired FdUrd transport across the plasma membrane. The more rapid turnover of FdUMP-bound thymidylate synthase observed in the FS sublines was neither accompanied by a decreased stability of the thymidylate synthase-FdUMP-5,10-methylenetetrahydrofolate ternary complex, nor an enhanced rate of degradation of FdUrd to the less potent agent, 5-fluorouracil [51-21-8]. In addition, the growth rates of the 2 FS sublines were similar to that of FdUrd sensitive cells in medium containing hypoxanthine, methotrexate, and thymidine, indicating that there was no depletion of thymidine kinase (EC 2.7.1.21) (ATP:thymidine-5'-phosphotransferase) [9002-06-6] in the FS sublines. Apparently enhanced activities of acid and alkaline phosphatases, which influence the intracellular accumulation and retention of FdUMP, are important determinants of stable FdUrd resistance in CCRF-CEM cells.

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L4 ANSWER 15 OF 23 CANCERLIT on STN
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AN 1998641116 CANCERLIT

DN 98641116

TI Phosphorylation of Mdr-1 and prevention of CDC 2 activation correlated with decreased apoptosis induced by paclitaxel in the presence of GL331 (Meeting abstract).

AU Shu C H; Huang T S; Whang-Peng J; Yang W K

CS Veterans General Hospital-Taipei, Taipei, Taiwan 112.

SO Proc Annu Meet Am Assoc Cancer Res, (1997) 38 A4116. ISSN: 0197-016X.

DT (MEETING ABSTRACTS)

LA English

FS Institute for Cell and Developmental Biology

EM 199803

- ED Entered STN: 19980417 Last Updated on STN: 19980417
- Paclitaxel is a microtubule stabilizer and has been used as a promising AB chemotherapeutic agent for various human cancers, especially advanced ovarian and breast cancers. GL331 is a new semisynthetic podophyllotoxin compound developed to cope with the multiple drug resistance property evolved in cancer cells against its congener etoposide. We have found that both paclitaxel and GL331 can cause abnormal CDC 2 activation and subsequent apoptosis in human nasopharyngeal carcinoma (NPC) cell lines. Further analyses on two regulators of CDC 2, CDK 7 and CDC 25, in NPC cells demonstrated that paclitaxel caused an increase in CDK 7 kinase activity, while GL331 treatment elevated the CDC 25 phosphatase activity and caused the dephosphorylation of CDC 2 proteins on tyrosine-15 and threonine-14 residues, suggesting that paclitaxel and GL331 elicited distinct mechanisms leading to apoptosis. We further determined the cytotoxic effect and underlying mechanisms by combining paclitaxel with GL331. Our results reveal that the treatment with paclitaxel plus GL331 was less cytotoxic than the treatment with paclitaxel or GL331 alone. Both the activation of CDC 2 kinase and the induction of apoptosis were dramatically inhibited in NPC cells treated with 0.1 uM of paclitaxel and 1 uM of GL331 simultaneously. This antagonism is apparently associated with the phosphorylation of Mdr-1 and decreased intracellular level of paclitaxel induced by GL331.
- L4 ANSWER 16 OF 23 CANCERLIT on STN
- AN 75803184 CANCERLIT
- DN 75803184
- TI BASIS FOR CLINICAL RESISTANCE TO ANTITUMOR NUCLEOSIDE ANALOGS.
- AU Hall T C
- CS Univ. South. Cal. Cancer Cent., Los Angeles.
- SO Ann N Y Acad Sci, (1975) 255 235-243. ISSN: 0077-8923.
- DT Journal; Article; (JOURNAL ARTICLE)
- LA English
- FS Hierarchical Classification of Proteins
- EM 197604
- ED Entered STN: 19941107 Last Updated on STN: 19941107
- AB The inability to give a safe dose of a drug that will inhibit tumor growth in the human patient is termed clinical drug resistance. It reflects the relative drug responsiveness in the same patient of the tumor and of the patient's normal tissue. The clinical tumor resistance is commonly equivalent to clinical host sensitivity and the ratio of these 2 factors, drug effect on tumor and drug toxicity to host, provide a ``therapeutic ratio'' that can be tipped toward clinical resistance by either decreasing host resistance or increasing tumor resistance. Resistance is related to the therapeutic aim, to the therapeutic aim, to the host tissues at risk, and to the species involved. There are several types of clinical drug resistance, including innate or initial drug resistance; acquired, secondary or drug-induced resistance; and collateral resistance-acquired pari passu to a drug. Pharmacological bases for resistance include the lack of intake into the body, plasma protein binding, transmembrane transport, extracellular drug destruction, conversion to nucleosides, conversion to the aglycone, destruction of the nucleotide, and alteration of target enzyme. Resistance related to the following drugs is discussed: 6-mercaptopurine ribonucleoside, 6-methylthiopurine ribonucleoside, b-g-deoxythioguanosine, purine nucleotide phosphatases, 5-fluorodeoxyuridine, 5-fluorouridine, 1-b-D-arabinofuranosylcytosine, and 5-azacytidine. Mechanisms for circumventing clinical resistance include: inhibition of nucleoside phosphorylases, inhibition of cytidine deaminase, inhibition of purine nucleotide phosphatases, search for collateral sensitivity, use of selective combination, delivery to localized tumor areas, synthesized drug activated by catabolism, metabolic conditioning, metabolic activation, differential

genome activation, and specific sequential sensitivity enhancement. (59 refs)

- L4 ANSWER 17 OF 23 DRUGU COPYRIGHT 2004 THOMSON DERWENT on STN
- AN 1997-42692 DRUGU F
- TI Phosphorylation of Mdr-1 and prevention of CDC 2 activation correlated with decreased apoptosis induced by paclitaxel in the presence of GL-331.
- AU Shu C H; Huang T S; Whang Peng J; Yang W K
- CS Nat.Health-Res.Inst.Taipei; Univ.Yang-Ming
- LO Taipei, Taiwan
- SO Proc.Am.Assoc.Cancer Res. (38, 88 Meet., 613, 1997) ISSN: 0197-016X
- AV Veterans General Hospital, Taipei, Taiwan.
- LA English
- DT Journal
- FA AB; LA; CT
- FS Literature
- AN 1997-42692 DRUGU P
- Paclitaxel (P) is a microtubule stabilizer and has been used as a promising chemotherapeutic agent for various human cancers, especially advanced ovarian and breast cancers. GL-331 is a new semi-synthetic podophyllotoxin compound developed to cope with the multiple drug-resistance property evolved in cancer cells against its congener etoposide. In this, the combination of P and GL-331 was antagonistic in NPC cells. Phosphorylation of Mdr-1 and prevention of CDC 2 activation correlated with decreased apoptosis induced by P in the presence of GL-331. (conference abstract).
- ABEX Both P and GL-331 can cause abnormal CDC 2 activation and subsequent apoptosis in human nasopharyngeal carcinoma (NPC) cell-lines. Further analyses on 2 regulators of CDC 2, CDK 7 and CDC 25, in NPC cells demonstrated that P caused an increase in CDK 7 kinase activity, while GL-331 treatment elevated the CDC 25 phosphatase activity and caused the dephosphorylation of CDC 2 proteins on tyrosine-15 and threonine-14 residues, suggesting that P and GL-331 elicited distinct mechanisms leading to apoptosis. The Authors further determined the cytotoxic effect and underlying mechanisms by combining P with GL-331. Treatment with P plus GL-331 was less cytotoxic than treatment with P or GL-331 alone. Both the activation of CDC 2 kinase and the induction of apoptosis were dramatically inhibited in NPC cells treated with 0.1 uM of P and 1 uM of GL-331 simultaneously. This antagonism is apparently associated with the phosphorylation of Mdr-1 and decreased intracellular level of P induced by GL-331. (PH)
- L4 ANSWER 18 OF 23 DRUGU COPYRIGHT 2004 THOMSON DERWENT on STN
- AN 1991-26431 DRUGU B P
- TI Secretion of Lysosomal Enzymes by Drug-Sensitive and Multiple Drug-Resistant Cells.
- AU Warren L; Jardillier J C; Ordentlich P
- LO Philadelphia, Pennsylvania, United States
- SO Cancer Res. (51, No. 8, 1996-2001, 1991) 2 Fig. 3 Tab. 41 Ref. CODEN: CNREA8 ISSN: 0008-5472
- AV Wistar Institute of Anatomy and Biology, Philadelphia, Pennsylvania 19104, U.S.A.
- LA English
- DT Journal
- FA AB; LA; CT; MPC
- FS Literature
- AN 1991-26431 DRUGU B P
- The multiple drug-resistant human lymphoblastic leukemic cell, CEM/VLB100, had a reduced content of lysosomal enzymes and a greater relative rate of secretion of these enzymes, than the drug-sensitive cells CEM. The ability of CEM/VLB100 cells to accumulate (3H)vinblastine (VLB) was also greatly reduced. However, these effects were not seen in anthracycline- and vincristine-resistant HL60 cells or in CEM/VM-1 cells. Verapamil (VP; Boehr.Mannheim)

inhibited both the efflux of (3H)VLB and the secretion of lysosomal enzymes in CEM/VLB100 cells. In addition, secretion of N-acetylglucosaminidase (NAGA) and efflux of (3H)VLB by CEM/VLB100 cells was enhanced by NaCl.

ABEX The multiple drug-resistant human lymphoblastic leukemic cell, CEM/VLB100, had a reduced content of lysosomal enzymes compared with the drug-sensitive cells CEM. The levels of NAGA and beta-galactosidase were reduced by 77.1% and 81.1% in the CEM/VLB100 cells. However, these effects were not seen in anthracyclineand vincristine-resistant HL60 cells or in CEM/VM-1 cells. In addition, the rate of secretion of these enzymes was greater in CEM/VLB100 cells than in CEM cells. The % of the total NAGA and beta-galactosidase secreted over 30 min was 8.8% and 5.7%, respectively, in CEM cells, and 14.4% and 11.1%, respectively, in CEM cells. The amount and rate of release of acid phosphatase was low and did not vary between the cell lines. VP inhibited both the efflux of (3H) VLB and the secretion of lysosomal enzymes in CEM/VLB100 cells. VP at a concentration of 50 uM increased the accumulation of (3H)VLB by 3.4-fold and inhibited the secretion of NAGA by 50%. In addition, secretion of NAGA and efflux of (3H)VLB from CEM/VLB100 cells was enhanced by the addition of NaCl to the sucrose-containing medium. development of multiple drug resistance in CEM cells did not alter the rate of synthesis of protein as a whole or of NAGA specifically. When CEM/VLB100 cells were incubated with (3H)VLB and fractionated on a Percoll gradient, the distribution of (3H) VLB among the various populations was similar to that of NAGA. Loss of enzyme and drug took place from the vesicular populations to varying degrees when cells were induced to secrete. (W114/SL)

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L4 ANSWER 19 OF 23 DRUGU COPYRIGHT 2004 THOMSON DERWENT on STN
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- AN 1984-22335 DRUGU P T
- TI Drug Resistance in Cancer.
- AU Curt G A; Clendeninn N J; Chabner B A
- LO Bethesda, Maryland, United States
- SO Cancer Treat.Rep. (68, No.1, 87-99, 1984) 2 Fig. 1 Tab. 150 Ref. CODEN: CTRRDO
- AV Clinical Pharmacology Branch, Division of Cancer Treatment, National Cancer Institute, Bldg 10, Rm 6N119, Bethesda, MD 20205, U.S.A.
- LA English
- DT Journal
- FA AB; LA; CT
- FS Literature
- AN 1984-22335 DRUGU P T
- Cellular mechanisms of resistance to cytotoxic drugs in clinical and experimental cancer are reviewed with particular regard to methotr -exate, cytarabine, 5-azacytidine, 5-fluorouracil, alkylating agents (melphalan, mechlorethamine), cisplatin, 6-thiopurines (6-mercapto -purine, 6-thioguanine), steroids, antitubulin agents (vincristine, vinblastine, demecolcine olchicine), antitumor antibiotics (doxo -rubicin) and other relevant agents (PALA, pentostatin, hydroxyurea), with an additional topic of interest being pleiotropic drug resistance and its apparent reversibility by calcium-channel blockers (verapamil, diltiazem, nicardipine, niludipine, nimodipine), calmodulin inhibitors (prenylamine, trifluoperazine, chloripramine) and an antihypertensive agent (reserpine).

ABEX Established or putative mechanisms of such resistance include the following (specifically altered system as indicated): defective transport for methotrexate, melphalan, mechlormethamine (carrier mediation), cytarabine (membrane nucleoside binding sites) and doxorubicin (efflux); defective metabolic activation for ara-C (deoxycytidine kinase), 5-azacytidine (uridine-cytidine kinase), 5-FU (uridine kinase, orotate phosphoribosyl-transferase, uridine phosphorylase), 6-mercaptopurine, 6-thioguanine (HGPRT), methotrexate (polyglutamation) and doxorubicin (P450, flavin reductase); increased metabolic inactivation for 6-mercaptopurine, 6-thioguanine (membrane alkaline phosphatase

), ara-C (cytidine deaminase), alkylators (intracellular glutathione, metallothionein), bleomycin (bleomycin hydrolase), cisplatin (intracellular metallothionein) and doxorubicin (intracellular glutathione, degradation), altered DNA repair for alkylators, cisplatin and doxorubicin (damaged base excision, excised segment ligation); gene amplification for cadmium (metallothein gene copy number, g-c-n), PALA (aspartate transcarbamylase g-c-n), methotrexate (DHFR g-c-n), doxorubicin (unstable resistance/double-minute chromosomes as gene product), 5-FU (thymidylate synthetase g-c-n) and pentostatin (adenosine deaminase g-c-n); altered targets for methotrexate (DHFR), vincristine (tubulin), hydroxyurea (ribonucleotide reductase), 5-FU (thymidylate synthetase), steroids (steroid receptor) and doxorubicin (membrane lipid affinity); altered nucleotide pools for ara-C (CTP, dCTP); salvage pathways for methotrexate (purines) and 5-FU (thymidine kinase); pleiotropic resistance for doxorubicin, vinca alkaloids and deactinomycin (energy-dependent efflux).

- L4 ANSWER 20 OF 23 DISSABS COPYRIGHT (C) 2004 ProQuest Information and Learning Company; All Rights Reserved on STN
- AN 1999:57023 DISSABS Order Number: AAI9931135
- TI SOLID TUMOR STRESS RESPONSES AND DRUG RESISTANCE: INVOLVEMENT OF NF-KAPPAB ACTIVATION IN SENSITIVITY OF EMT6 CELLS TO THE TOPOISOMERASE II-DIRECTED AGENT TENIPOSIDE
- AU LIN, Z PING [PH.D.]; KENNEDY, KATHERINE A. [adviser]
- CS THE GEORGE WASHINGTON UNIVERSITY (0075)
- SO Dissertation Abstracts International, (1999) Vol. 60, No. 5B, p. 2076. Order No.: AAI9931135. 194 pages.
- DT Dissertation
- FS DAI

AΒ

LA English

Stress conditions associated with solid tumor microenvironments, including hypoxia, low pH, and nutrient deprivation have been long implicated in clinical intrinsic **drug resistance**, and associated with tumor cell resistance to topoisomerase II-directed agents in vitro. The involvement of two stress-induced signaling pathways, termed the unfolded protein response (UPR) and the ER-overload response (EOR), in **drug resistance** to the topoisomerase II-directed agent teniposide was investigated in EMT6 mouse mammary tumor cells.

Chemicals that disrupt ER function and physiological stress conditions cause the induction of glucose-regulated protein 78 kDa (GRP78) through the UPR pathway. Treatment of EMT6 cells with the serine/threonine kinase inhibitor, H7, decreased the basal level of GRP78 mRNA and inhibited the induction of GRP78 mRNA by brefeldin A, tunicamycin, and hypoxia. Treatment with the serine/threonine phosphatase inhibitor, okadaic acid, slightly increased both basal and brefeldin A-induced GRP78 mRNA levels, and counteracted the inhibitory effect of H7 on GRP78 mRNA expression. These results suggest that the UPR pathway/GRP78 induction involves a H7-sensitive serine/threonine kinase.

Disruption of ER function and exposure to hypoxia have also been shown to activate the nuclear transcription factor- κB (NF- κB) presumably through the EOR pathway. Treatment of EMT6 cells with brefeldin A, okadaic acid, and hypoxia all caused the activation of NF- κB . Transient transfection of EMT6 cells with the dominant-negative mutant of I $\kappa B\alpha$ abolished okadaic acid and hypoxia-induced activation of NF- κB . It suggests that stress-induced NF- κB activation in EMT6 cells is mediated in part through the phosphorylation of serines 32 and 36 on I $\kappa B\alpha$. Furthermore, treatment with the proteasome inhibitor, MG-132, attenuated the activation of NF- κB in EMT6 cells treated with brefeldin A, okadaic acid, and hypoxia.

Using clonogenicity assays, the sensitivity of EMT6 cells to teniposide was determined in the presence of **inhibitors** of either the UPR or the EOR pathway. Blockade of the UPR pathway/GRP78 induction by H7 did not reverse BFA-induced resistance to teniposide. In contrast, **inhibition** of the EOR pathway/NF-kB activation

by MG-132 reversed stress-induced resistance to teniposide. Taken together, these results suggest that stress-induced resistance to teniposide is mediated by the activation of NF- κ B rather than by the induction of GRP78.

- L4 ANSWER 21 OF 23 DISSABS COPYRIGHT (C) 2004 ProQuest Information and Learning Company; All Rights Reserved on STN
- AN 1998:32036 DISSABS Order Number: AAR9824827
- TI THE EFFECT OF HYPOXIA ON TWO MAJOR CANCER CELL CHARACTERISTICS: UNCONTROLLED PROLIFERATION AND INVASIVENESS
- AU KRTOLICA, ANA [PH.D.]; LUDLOW, JOHN W. [adviser]
- CS THE UNIVERSITY OF ROCHESTER (0188)
- SO Dissertation Abstracts International, (1998) Vol. 59, No. 2B, p. 494. Order No.: AAR9824827. 167 pages.
- DT Dissertation
- FS DAI

AB

LA English

Hypoxia or low oxygen availability is commonly experienced by cancer cells within solid tumors. It may also be encountered by malignant cells during their invasion through extracellular matrix in the early stages of metastasis. Hypoxia increases radiation and drug resistance of the tumor cells thus impeding the efficient treatment of cancer. It is clear that a better understanding of the effects of hypoxia on cancer cells and the underlying mechanisms involved

treatment of cancer. It is clear that a better understanding of the effects of hypoxia on cancer cells and the underlying mechanisms involved in hypoxia-induced cell changes will provide knowledge needed for the rational design of cancer therapies to reverse hypoxia induced tumor cell resistance.

The goal of this study was to investigate the effects of hypoxia on two major characteristics of cancer cells--their proliferative ability and invasive potential. We present evidence that hypoxia does not inhibit invasion of four different ovarian carcinoma cell lines through the extracellular matrix as assessed by in vitro invasion assays. In addition, we show by zymography and immunoblotting that the detected proteolytic activity, which is due to matrix metalloproteinase MMP-2, is only partially inhibited under hypoxic conditions and is not rate limiting in the invasive process.

While invasiveness does not seem to be significantly affected by hypoxia, we found that a hypoxic environment inhibits proliferation of both ovarian carcinoma cell lines and a non-transformed cell line, CV-1P, leading to reversible G\$\sb1\$ cell cycle arrest. This G\$\sb1\$ arrest is concomitant with activation of the growth suppressive function of the retinoblastoma protein, pRB. The growth suppressive activity of pRB is controlled by its phosphorylation state which varies as a function of cell cycle phase. During G\$\sb1\$ the hypophosphorylated, active from predominates, while the hyperphosphorylated, inactive from accumulates during S, G\$\sb2\$ and M phase. We present evidence that hypoxia-induced pRB dephosphorylation results from synergy between an increase in specific pRB-directed phosphatase activity and p27 mediated inhibition of CDK2 activity. Concomitant with this induction of phosphatase activity and CDK2 inhibition is a dramatic increase in p27 protein abundance and a decrease in cyclin A and E protein levels. Immunoprecipitation studies revealed a high amount of p27 in association with cyclin-CDK2 complexes during hypoxia, while this association is undetectable under aerobic conditions. These data are consistent with the hypothesis that p27 inhibition of active cyclin-CDK2 complexes, in addition to lower amounts of cyclin A and E being available for active complex formation, can together result in the observed decrease in CDK2 activity during hypoxia. A model of the molecular mechanisms involved in hypoxia-induced cell cycle arrest is proposed.

- L4 ANSWER 22 OF 23 PROMT COPYRIGHT 2004 Gale Group on STN
- AN 1998:477403 PROMT
- TI Hepatocytes as a source of collagen type XVIII endostatin

SO The Lancet, (12 Sep 1998) pp. 879. ISSN: 0099-5355.

LAEnglish WC

821

FULL TEXT IS AVAILABLE IN THE ALL FORMAT

AB Collagen type XVIII (C18) belongs to a novel family of basement membrane collagens.1 The 184 aminoacid proteolytic fragment of the carboxyterminus of C18, endostatin, has been identified as a potent endogenous inhibitor of angiogenesis.2,3 The strategy to combat tumour growth and metastasis by inhibition of angiogenesis is attractive, since solid tumours depend on a vascular supply by newly formed blood vessels. Since endothelial cells, which are required for this process, are non-neoplastic, blocking their migration and proliferation should not lead to resistance. In mice, recombinant endostatin decreased the size of established primary and secondary tumours, and repetitive application of the peptide prevented recurrence.3 Previous Northern analysis showed almost exclusive expression of C18 RNA in the liver,1 but the cellular source of C18, from which endostatin derives, is unknown. To localise the C18/endostatin expressing cells in vivo, we carried out in-situ hybridisation4 with an RNA probe that encodes endostatin, combined with cell-specific immunostaining for vimentin, cytokeratin, and CD31 by the alkaline phosphatase-antialkaline phosphatase method, on three normal, four cirrhotic, and three neoplastic human livers. The RNA probe was generated by oligo(dT)-primed reverse transcription of human liver RNA with subsequent amplification by oligodeoxyribonucleotide primers corresponding to nucleotides 1483-1501 (CGA CCC ACA AGC CCA CCC G) and 2083-2062 (TCT CCG GCC ATC TGC ATC CAG G, endostatin-encoding region) of the published sequence.1 The amplicon was cloned into pZErO (Invitrogen, Leek, Netherlands) and its authenticity verified by restriction digests, DNA sequence analysis, and expression of the endostatin protein in Escherichia coli and baculovirus (not shown). Plasmids were linearised with XbaI or EcoRI restriction endonuclease, to generate sulphur- 35-labelled antisense or sense (control) run-off transcripts with T7 or SP6 RNA polymerase (BRL Gibco, Eggenstein, Germany). Transcripts were hybridised under high stringency, followed by RNase A digestion to remove mismatched sequences as described.4 For double labelling, immunohistology was done immediately before prehybridisation.4 Positive and negative controls included hybridisation with procollagen [alpha]1(I) and the sense (non-complimentary) endostatin probe, respectively.

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- L4ANSWER 23 OF 23 PROMT COPYRIGHT 2004 Gale Group on STN
- ΑN 1998:153179 PROMT
- TIOntogen Corporation Announces Issuance of US Patent on New Modulator For Restoring Sensitivity to Multi-Drug Resistant Tumor Cells
- SO PR Newswire, (26 Mar 1998) pp. 326LATH032.
- LA English
- WC 533

FULL TEXT IS AVAILABLE IN THE ALL FORMAT

AB SAN DIEGO, March 26 /PRNewswire/ -- Ontogen Corporation, a drug discovery and development company, announced today that the United States (US) Patent and Trademark Office has issued a patent for the use of imidazoles as modulators that restore the sensitivity of multi-drug resistant cancer cells to chemotherapeutic agents. The patent covers methods of use and methods of manufacture pertaining to these novel pharmaceutical compositions added Dr. Barry E. Toyonaga, Ph.D., Chairman, President, CEO and Founder of Ontogen Corporation.

"By automating the medicinal chemistry process, Ontogen has discovered several new drug entities and is optimizing them for enhanced bioavailability, toxicity profiles and therapeutic efficacy, " stated Dr. Toyonaga. "Our philosophy has been to create a strong pharmaceutical patent portfolio which protects bioactive substances and their uses, in addition to the hardware and software that we have patented. Ontogen has shown measurable progress in moving compounds for our three corporate partners into pre-clinical trials and beyond. Now Ontogen is pursuing its own corporate research in cancer multi- drug resistance."
"This recently issued patent further bolsters Ontogen's intellectual property portfolio with 26 pending applications world-wide and 8 allowed or issued patents," added Frank S. Chow, Esq., Ontogen's Chief Patent Counsel. "Earlier, the company patented its work surrounding the inhibition of protein tyrosine phosphatases (PTPases) which protects Ontogen's non-phosphorus, non- peptide compound libraries from which several selective inhibitors to these enzymes are being evaluated in pre-clinical models."

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